CCL 405 Rev. 9/2005 KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Bureau of Child Care and Health Facilities

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SELF-EVALUATION CHECKLIST FOR A FAMILY FOSTER HOME

Good beginnings last a lifetime. This form is provided for your use as a resource and guide to help you determine your own compliance with Kansas laws and licensing regulations. It does not need to be submitted with your application. We recommend that you read the Kansas Laws and Regulations for Licensing Family Foster Homes for Children before going through the checklist. You are responsible for maintaining family foster home in compliance with the laws and regulations. Your sponsoring agency licensing social worker is available if you have any questions about how to meet any law or regulation.

NOTE: The statements on this form do not reflect all the regulations for a family foster home. The statements are NOT the actual laws or regulations. Please remember to refer to the regulation book for all applicable regulations and for the complete statement of each regulation. You may use the blank spaces after each statement to record your own comments.

K.S.A. 65-512 Inspections. I/we will give right of entry and access to every place on the premises to the CPA and KDHE licensing surveyors.	(7) I/We have emergency numbers listed by or on the tele each child.	phone for
I we will provide the Surveyor with records which are required	(8) I/We have records for each person living in our home, my/our own and related children.	including
to be inspected. K.S.A. 65-513 Changes or alterations required to comply.	(a) Adult members records include name, date of bir form, health certificate, neg. TB test or chest x-ra training certificates, valid driver's license.	
I/we understand that it is my/our responsibility to make changes or alterations to correct any findings provided in any Notice of Survey Findings within 5 days of the receipt of the notice.	(b) Children's records include name, date of birth, he assessment, immunization record.	ealth ————
(1) I/We have in our possession, a copy of the Regulations	(c) Each child placed in foster care also has medical medical record, dental record, placement agreen placement date and discharge date.	
for Licensing Family Foster Homes for Children and General Regulations. [K.A.R. 28-4-312(h)] (2) I/We agree to maintain the number of foster children in	(9) I/We have the following information available at my/ou (a) Name, address and phone number of child's sociand parent(s) if part of the service plan.	
care to the allowed license capacity.[K.A.R. 28-4-312(c)] (3) I am/We are providing only one type of care.	(b) Name and telephone number of any persons aut pick up a foster child in my care.	horized to
(If other care is provided, please notify KDHE about the other type of care, including child day care and adult care being provided.)	(c) Medical and dental records, signed placement at and medical/surgical consents for each foster ch	
(4) I/We understand an exception can be requested. [Exception request form may be obtained from the CPS]	(10) Health certificates for all household members are on for progress as required. (See K.A.R. 28-4-126 and K.A for requirements.)	
(5) I/We understand that training is required for foster parents. I/We	(11) My/Our cat(s)/dog(s) have current rabies shots. Any property for and maintained in a sanitary manner.	pets are cared
have documentation on file at our home. (6) I/We plan to provide specialized family foster care. [If yes, Please notify your CPA and KDHE of the type of specialization]	(12) I/We understand that I/we must never leave children unattended in any vehicle in which I/we transport then	
L. yes,	(13)I/We have a plan posted for:	

h)	(a)	Evacuating children in case of fire; selter for children in case of a tornado;	(16) I/We have read and agree to comply with K.A.R. 28-4-314(f)(1) through (6) concerning the use of appropriate discipline and prohibited punishment. (Refer to regulation book.)	
D)	A SI	letter for children in case of a tornado,	profilbited purishment. (Refer to regulation book.)	
c)) Emergency plans for disasters and serious injury;		(17) To the best of my/our knowledge, my/our home meets legal requirements of the community as to zoning, fire protection,	
d)		e discuss these plans with the foster children and care givers and o record of monthly drills.	water supply and sewerage disposal. [K.A.R. 28-4-315(a)]	
	·	•	(18) I/We have a refrigerator in which to store perishable foods.	
14)		ur home: Is safe and free from hazards;	(19) All milk and dairy products used in the home are pasteurized.	
	(b)	Is reasonably clean and uncluttered;	(20) If children under one year of age receive care in my/our home, and I/we use private well water for drinking. I/we will use	
	(c)	Is skirted and anchored and has two exits, if a mobile home;	commercially bottled drinking water until a laboratory test confirms nitrate content is less than ten (10) milligrams per liter. Well	
	(d)	Has a second exit readily available;	water shall be boiled five (5) minutes before giving to a child.	
	(e)	Has windows in all bedrooms;	(21) Outdoor play space, fenced if necessary, is available and is free from hazards which might be dangerous to the life or safety of a child.	
	(f)	Has a working smoke detector on each occupied level of the house;	(22) (a) My/Our in-ground swimming pool, and/or any other body of	
	(g)	Has covered outdoor trash containers;	water twelve inches or more in depth, are protected by a 5' fence to discourage chance access by children.	
	(h)	Has medications, household poisons, sharp knives and sharp scissors and tools stored out of children's reach or locked up;	(b) My above ground swimming pool is enclosed by a fence not less than 5' high or is 4' high and steps are removed when	
	(i)	Has locked storage for guns, or guns maintained with trigger locks;	the pool is not in use.	
	(j)	Has properly guarded heating stoves;	(c) Children are supervised while swimming by a person who has a life saving certificate or CPR training and can swim.	
	(k)	Has electrical outlets covered when children three years and	(23) Each child will have an individual bed.	
(()	under are in care;	(a) I/We will use a crib for children under two (2) years of age.	
	(I)	Has a floor furnace: Yes No (circle) If yes, it is guarded to prevent young children from being burned.	(b) If children six years of age and older share a bedroom, they will be of the same sex.	
	(m)	Has a basement or second floor that is used by the family. If yes:	(c) Children over eighteen (18) months of age will not share a bedroom with adults except in case of illness or developmental	
		Children are sleeping/will sleep in my basement.	disabilities requiring close supervision.	
		2. Children will use basement.	(d) If an infant shares a parent's bedroom, the room will have a minimum of 130 square feet of floor space.	
		3. My second floor is used for sleeping or child care.	(e) All bedrooms in my/our house have windows which are easily	
	(n)	Has handrails on stairways.	opened and which provide ready access to the outside.	
	(0)	Has stairways guarded by gates when children three years and under are in care.	(f) Bedrooms used by more than one person have at least 45 square feet per person. If the bedroom is only used by one person, it has at least 70 square feet of floor space.	
15)	adm	understand that the following precautions are to be taken in inistering medication to children in my care:	(24)Suspected child abuse or neglect will be reported to authorities as required in regulation K.A.R. 28-4-118 (Refer to regulation book.)	
	(a)	 A record will be kept of the administration of non-prescription medications. 	(25)Substitute child care will be provided in the absence of the foster parent(s) as required in regulation K.A.R. 28-4-314(h)(1)&(2).	
	(b)	Prescription medications shall be administered only from a bottle containing the child's name, dosage and name of physician.	Parental/guardian visitation plan is on file in the home.	